

## FERENCE & ASSOCIATES

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### USPTO FACSIMILE COVER SHEET

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To: Commissioner for Patents  
Fax Number: (517) 273-8300  
Date: October 18, 2006  
Pages: 17 pages (including this cover sheet)

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#### MESSAGE:

METHOD AND SYSTEM FOR CREATING AND ADMINISTERING INTERNET  
MARKETING PROMOTIONS

Examiner J. Janvier  
Serial No. 09/805,336

Amendment Transmittal  
Petition and Fee for Extension of Time  
Amendment

(696.003)

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Amendment Transmittal

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Atty. Docket No. 696.003

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of : Srinivasan et al.  
Serial No. : 09/805,336 Examiner : Jean D. Janvier  
Filed : March 13, 2001 Group Art Unit : 3622  
For : METHOD AND SYSTEM FOR CREATING AND  
ADMINISTERING INTERNET MARKETING  
PROMOTIONS

HON. COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☒ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☒ Small Entity status under 37 C.F.R. 1.27 has previously been established.

**CERTIFICATE OF FACSIMILE TRANSMITTAL**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on October 18, 2006 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III  
(Type or print name of person transmitting paper or fee)

  
(Signature of person transmitting paper or fee)

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Atty. Docket No. 696.003

5. ☐ Also enclosed: \_\_\_\_\_
6. ☒ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)		SMALL ENTITY				OTHER THAN A SMALL ENTITY	
					RATE	FFR			RATE	FFR
Total Claims	17	** 20	= * 0	x	\$25	=	O	x	\$50	=
Ind. Claims	1	*** 3	= * 0	x	\$100	=	R	x	\$200	=
<input type="checkbox"/> Multiple Dependent Claim Presented				+	\$180	=	O	+	\$360	=
					<b>TOTAL</b>	= \$0	O		<b>TOTAL</b>	= \$
							R			

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.  
 \*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$\_\_\_\_\_ to cover the filing fee.

Respectfully submitted,

FERENCE &amp; ASSOCIATES

Dated: October 18, 2006

By Stanley D. Ference III  
 Stanley D. Ference III  
 Reg. No. 33,879

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